Do NOT submit this application to IS until after completing steps 1-8 (below):

1. You have checked your most recent I-20 to verify that:
   - your name is correctly listed and spelled (field #1). It should match your passport.
   - the major field of study matches your OPT request (field #5)
   - the expiration date listed is NOT prior to your actual program completion date (field #5)

   If any of the above items are not correct, you must request a change to and/or correction of your I-20, by submitting a Green Sheet Request Form, Status Extension Request Form, or Change of Program Level form prior to or at the same time as submitting your OPT application. **Please write, “Attention: Student Employment Coordinator” at the top of your Green Sheet Request Form.** Any missing information or documents will result in a delay in processing. **You should allow at least 5 business days for processing.**

   All questions regarding I-20 changes in relation to your OPT application should be directed to isoemp@lsu.edu.

2. You have filed for graduation at your undergraduate college with your academic advisor

3. You have downloaded the most recent version of this application and the I-765 form by going to our website, www.lsu.edu/iso and referred to this website for important information about OPT deadlines

4. You have obtained the required, original, academic advisor signature on this application

5. You have included your completed I-765 form.

6. You have included your completed OPT Student Acknowledgement Form.

7. You have your current original I-20 document.

8. You have checked that all forms included in this application have been filled out in their entirety. Any missing information will result in delays in processing your application.

9. **Please make sure that none of your documents are signed, dated, or submitted earlier than the posted “Earliest Date that you can apply to IS” for your specific semester, as shown in the deadlines on our website.**
PART I. To be completed by the F-1 International Student and verified by the Academic Advisor for the degree on which this application is based.

A. Name: _______________________________ LSU ID #: 89 - __ __ __ __ __ __

B. I am applying for OPT based on: BS/BA in ___________________________(Major field of study)

Your most recent I-20 must reflect the degree of your OPT request.

C. I am requesting my OPT employment dates to begin (check only one):

☐ before program completion: ☐ full-time or ☐ part-time OR ☐ after program completion (full-time)

D. Anticipated graduation date / semester: __________________________

E. OPT authorization requested dates: Start date __________ to End date __________ (REQUIRED)

F. Date of 1st F-1 entry to U.S. OR effective date on F-1 I-797 approval notice: __________________________

G. Have you ever had full-time CPT authorization for the same education level as this OPT request? □ YES □ NO

If YES, for which degree: ____________________________________________

List all dates of CPT authorization for same education level: ____________________________________________

H. Have you ever had OPT or OPT STEM authorization for any degree levels? □ YES □ NO

If you answered "YES" to this question, please submit a copy of your previous EAD card(s) with this application

If YES, check one: ☐ part-time authorization ☐ full-time authorization

For which degree(s) and level(s): ______________________________________

List all dates of OPT and OPT STEM at all levels: _________________________________________________

I. Have you ever violated your F-1 status? □ YES □ NO If YES, which semester(s): _______________________

If YES, check only one: My F-1 status was reinstated via:

☐ mailing an application to US CIS. ☐ exiting the US and reentering with a new SEVIS I-20.

Date of reinstatement approval: __/__/____ (m/d/yr) Date of reentry: __/__/____ (m/d/yr)

J. Are you pursuing a double major? ☐YES ☐NO

If YES, list all majors you are seeking: _________________________________________________

By signing below, the academic advisor certifies that the information on the application relating to the student’s academic record (graduation date and fields of study) is true and correct.

Academic advisor’s name (printed) (REQUIRED) Academic advisor’s signature (REQUIRED) Date signed (REQUIRED)

During your period of OPT employment authorization, you are required to report any changes to your name or residential address within 10 days of your move. You are also required to report your employer name and address as well as any future changes in employment (terminations, laid-off, change of companies) within 10 days of the employment or change in employment, by contacting isoemp@lsu.edu.

By signing below, you, the F-1 student, certify that all information on this application is true and correct. While on OPT, you are not authorized to register for classes in a secondary or new degree program. If you do not complete your program by the anticipated graduation date you have listed above, you must notify IS immediately. I certify that I understand that if I submit an incomplete request form to International Services, I will be contacted for correction(s) or additional information. I authorize that all information provided on this form, including any and all personal, financial, academic data and/or other data may be shared with LSU International Services – International Programs to facilitate the request. This data will be securely retained indefinitely. To learn more about privacy at LSU, please see the LSU Privacy Statement. (www.lsu.edu/privacy)

F-1 student’s name printed (REQUIRED) F-1 student’s signature (REQUIRED) Date (REQUIRED)

OPT Undergraduate Application Updated 2/2019 ARK
PART II. Required SEVIS Reporting information to be completed by the F-1 international student.

Before we can process your OPT application, we need some additional information. We understand that you may not have a job yet, that is fine. The SEVIS system has recently been updated and it now requires additional information before we can update your employers or personal information. The system is also counting unemployment days now, so it is very important that you provide an accurate start and end date for all employment and changes.

Name: _________________________________________________________  LSU ID #: 89 - __ __ __ __ __ __ __

Please fill out the appropriate section below: A) if you have an Employer or B) if you do not have an employer.

A. IF YOU HAVE A PENDING EMPLOYER: Please provide all of the following required information so that we can move forward with updating your OPT information in SEVIS:

1. If this is a volunteer or self-employed job:  ☐ No  ☐ Yes, Volunteer  ☐ Yes, Self-Employed
2. Statement to explain how employment is related to student’s course of study (1000 characters or less):
   __________________________________________________________
   __________________________________________________________
   __________________________________________________________
   __________________________________________________________
   __________________________________________________________

3. Employer Name: ______________________________________________________________________
4. Start Date: ____________ (This should be no earlier than your OPT requested date, but it may change due to processing times)
5. End Date: ______________ (Leave blank since you are not working yet)
6. ☐ Full-Time (more than 20 hours/week)  ☐ Part-Time (20 hours or less per week)
7. Employer Address (complete, including building, room numbers, zip code, etc.):
   ______________________________________________________________________________________
   __________________________________________________________
   __________________________________________________________
   __________________________________________________________
   __________________________________________________________
   __________________________________________________________

8. Personal Address (complete, including apartment number, zip code, etc.):
   __________________________________________________________
   __________________________________________________________
   __________________________________________________________
   __________________________________________________________
   __________________________________________________________

9. Personal Email (non-LSU): ______________________________________________________________
10. Phone number (including Area Code): ____________________________________________________

B. IF YOU DO NOT HAVE AN EMPLOYER YET, we still need the following information:

1. Personal Address (complete, including apartment number, zip code, etc.):
   __________________________________________________________
   __________________________________________________________
   __________________________________________________________
   __________________________________________________________
   __________________________________________________________

2. Personal Email (non-LSU): ______________________________________________________________
3. Phone number (including Area Code): ____________________________________________________

Your OPT Application cannot be processed or entered into the SEVIS system if all of the above information in your section is not provided.